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Substitute for form 1449/PTO			Complete If Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			Application Number	10/781,505-Conf. #2913	
			Filing Date	February 18, 2004	
			First Named Inventor	Rafail Zubok	
			Art Unit	3733	
			Examiner Name	J. L. Cumberledge	
Sheet	1	of	2	Attorney Docket Number	SPINE 3.0-455 CIP CONT IV

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Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	Date Considered
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Sheet	2	of	2	Attorney Docket Number	SPINE 3.0-455 CIP CONT IV

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Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁴
		Country Code ² -Number ³ -Kind Code ⁴ (if known)				
	BA	WO-2004/026186-A1	04-01-2004	Mathys Medizinaltechnik AG		
	BB	WO-2004/019828-A1	03-11-2004	Mathys Medizinaltechnik AG		

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